COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

A ...

ATTORNEY'S DOCKET NUMBER PHFR030132 US

As a below named inventor, I	hereby declare that:		
My residence, post office add	ress and citizenship are as s	tated next to my name.	ম
		e name is listed below) or an origis claimed and for which a paten	
METHOD OF ENCODIN	IG VIDEO SIGNALS		
the specification of which (che	eck only one item below):		
is attached hereto.			
was filed as United States	application		
Serial No	·		·-
on			
and was amended	•		
on			
			٠,
was filed as PCT internation			
Number PCT/IB20	04/003384		
on 14 OCTOBER	2 2004		
and was amonded and a DO	T A-ti-la 40		. •
and was amended under PC			· • .
on	 		(if applicable).
	iewed and understand the co mendment referred to above	ntents of the above-identified spe	ecification, including the
I acknowledge the duty to dis Title 37, Code of Federal Reg		aterial to the examination of this a	application in accordance with
or inventor's certificate or of a States of America listed below any PCT international application	any PCT international applica w and have identified below a ation(s) designating at least o	ed States Code, § 119 of any fore tion(s) designating at least one c any foreign application(s) for pate ne country other than the United t of the application(s) of which pri	ountry other than the United ent or inventor's certificate or States of America filed by me
PRIOR FOREIGN/PCT APPI	LICATION(S) AND ANY PRIC	DRITY CLAIMS UNDER 35 U.S.	C. 119:
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
EUROPE	03300190.0	31 October 2003	YES

Combined Declaration For Patent Application and Power of Attorney (Concludes Reference to PCT International Applications)	Continued) Attomeys Docket Number PHFR030132: US:
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorall business in the Patent and Trademark Office connected therewith. (List name and re	
Jack E. Haken, Reg. No. 26,902	Direct Telephone Calls to:

	FULL NAME OF INVENTOR	FAMILY NAME WILINSKI	FIRST GIVEN NAME Piotr	SECOND GIVEN NAME
201	RESIDENCE & CITIZENSHIP	CITY EINDHOVEN	STATE OR FOREIGN COUNTRY THE NETHERLANDS	COUNTRY OF CITIZENSHIP POLAND
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY THE NETHERLANDS
	FULL NAME OF INVENTOR	FAMILY NAME VAREKAMP	FIRST GIVEN NAME Christiaan	SECOND GIVEN NAME
202	RESIDENCE & CITIZENSHIP	CITY Prof. Hoistlaan 6	STATE OR FOREIGN COUNTRY 5656 AA Eindhoven	THE NETHERLANDS
. –	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY THE NETHERLANDS

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202
Pate Wolfoshi	
DATE 8/2/2006	DATE

Michael E. Marion, Reg. No. 32, 266

Edward M. Blocker, Reg. No. 30,245

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(name and telephone number)

(914)332-0222

(July 1994)

COMBINED DECLARATION FOR PATENT	APPLICATION AND POWER OF ATTORNEY
(includes Reference to PCT International Applications)	

ATTORNEY'S DOCKET NUMBER PHFR030132 US

As a below named inventor	, I hereby declare that:		
My residence, post office a	ddress and citizenship are as s	tated next to my name.	7
I believe I am the original, f plural names are listed belo entitled:	irst and sole inventor (if only or ow) of the subject matter which	ne name is listed below) or an or is claimed and for which a pater	riginal, first and joint inventor (if nt is sought on the invention
METHOD OF ENCOD	ING VIDEO SIGNALS		
the specification of which (d	check only one item below):		
is attached hereto.			
was filed as United State	es application		
Serial No			
on			
and was amended			
on			· · · · · · · · · · · · · · · · · · ·
was filed as PCT interna	∼ .		
Number PCT/IB?	004/003384		
on 16 octo	BER LOOY		
and was amended under P	CT Article 19		$\sigma_{\rm i}$
on			(if applicable).
claims, as amended by any	amendment referred to above disclose information which is managed	ntents of the above-identified sp aterial to the examination of this	
or inventor's certificate or of States of America listed be any PCT international appli	of any PCT international application and have identified below a lication(s) designating at least of	ed States Code, § 119 of any for tion(s) designating at least one any foreign application(s) for pat one country other than the United t of the application(s) of which p	country other than the United ent or inventor's certificate or d States of America filed by me
PRIOR FOREIGN/PCT AP	PLICATION(S) AND ANY PRIC	ORITY CLAIMS UNDER 35 U.S.	.C. 119:
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
EUROPE	03300190.0	31 October 2003	YES

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)	Attorneys Docket Number PHFR030132 US
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosect	cute this application and transact
all business in the Patent and Trademark Office connected therewith. (List name and registration number)	

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32, 266 Edward M. Blocker, Reg. No. 30,245 Direct Telephone Calls to: (name and telephone number) (914)332-0222

	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
201	RESIDENCE &	CITY	Piotr STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	EINDHOVEN	THE NETHERLANDS	POLAND
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	THE NETHERLANDS
202	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		VAREKAMP	Christiaan	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Prof. Holstiaan 6	5656 AA Eindhoven	THE NETHERLANDS
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Hoistlaan 6	5656 AA Eindhoven	THE NETHERLANDS

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202
	Obenha
DATE	DATE 8/2/2006

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

PTC/SB/80 (11-04)

Approved for use through 11/30/2005. OMB 0551-0035

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I hereby 37 CFR	revoke all previous powers of attorney 3.73(b).	given in the applic	ation identified in	the attached state	ment under
I hereby	appoint:	· · · · · · · · · · · · · · · · · · ·			
	titioners associated with the Customer Number	: 247	37		
OR _		<u> </u>			
Prac	titioner(s) named below (if more than ten paten	t practitioners are to be	named, then a custom	ier number must be usi	ed):
	Name	Registration Number	Nam	ne e	Registration
-		122			Number
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as attorney	(s) or agent(s) to represent the undersigned bet	ore the United States P	atom and Tradomark	Office (USPTO) in con-	- dian with
any and all	patent applications assigned only to the unders this form in accordance with 37 CFR 3.73(b).	igned according to the L	JSPTO assignment re	cords or assignment de	ocuments
Please cha	nge the correspondence address for the applica	ation identified in the atta	ched statement unde	r 37 CFR 3.73(b) to:	
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	he address associated with Customer Number:	2473	7		
OR		<u> </u>		l	
Fim	ror vidual Name				
Address					
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Country					
Telephon			Fax		
A					
Assignee N	ame and Address:			•	
	KONIN	KLIJKE PHIL	IPS ELECTR	ONICS N.V.	
Groenewoudseweg 1					
5621 BA Eindhoven, The Netherlands					
	this form, together with a statement un				
the practi	ch application in which this form is use tioners appointed in this form if the app	ed. The statement u	nder 37 CFR 3.73() is authorized to ac	b) may be complete	ed by one of
and must	identify the application in which this Po	ower of Attorney is t	o be filed.		.oo.gee,
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee					
Signature Date 14 January 2005			y 2005		
Name				33-9637	
Title	Authorized Representa	tive	<u> </u>		

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

20/577107

PTO/SB/96 (08-03)

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STATEMEN	T UNDER 37 CFR 3.73 (6) CFF 25 APR 2006
Applicant/Patent Owner: Koninklijke Philips Electronics N.V.	
Application No./Patent No.: Concurrently F	iled/Issue Date: Concurrently
Entitled: METHOD OF ENCODING VIDEO SIGNALS	
Koninklijke Philips Electronics N.V. , a (Name of Assignee)	corporation (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1.	or
2. an assignee of less than the entire right, title and The extent (by percentage) of its ownership interes in the patent application/patent identified above by virtue.	est is%
A. [/] An assignment from the inventor(s) of the patent in the United States Patent and Trademark Office attached.	application/patent identified above. The assignment was recorded at Reel, Frame, or for which a copy thereof is
OR	
B. [] A chain of title from the inventor(s), of the patent below:	application/patent identified above, to the current assignee as shown
The document was recorded in the United	To: States Patent and Trademark Office at, or for which a copy thereof is attached.
2. From:	To:
The document was recorded in the United	States Patent and Trademark Office at, or for which a copy thereof is attached.
3. From:	To:
The document was recorded in the United	States Patent and Trademark Office at, or for which a copy thereof is attached.
[] Additional documents in the chain of title	are listed on a supplemental sheet.
[] Copies of assignments or other documents in the c [NOTE: A separate copy (i.e., the original assignments be submitted to Assignment Division in accordance recorded in the records of the USPTO. See MPEP	ent document or a true copy of the original document) dance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied below) is auth	orized to act on behalf of the assignee.
<u>4/12/2006</u> Date	EDWARD W. GOODMAN, REG. 28,613
Date	Typed or printed name
(914) 333-9611	MUNICIPAL TON
Telephone number	Signature
	Corporate Counsel Title
	THE

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.